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BIO-MED, Dr. CONRAD
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JUNE QUARTERLY TRIP REPORT

The quarterly medical trip for Brookhaven National Laboratory to the atolls of Utirik, Rongelap, and Bikini was conducted from June 16th thru July 3rd. Personnel on the trip included Konrad P. Kotrady, M.D., Billiam Lang and Tarmille Isado, the Public Health Nurses from Ebeye, and Tommy Lang, the Lab Technician. A dental team was unable to accompany this trip but went to the islands by scheduled field trip ship.

, patients recently treated by Brookhaven in the United States, were returned to their home islands. , however, returned with the LCU to Ebeye when it was determined that the health aide at Utirik would be unable to manage her care for the few weeks after our departure.

The trip was designed to carry out general medical care to the islands in support of investigations of the long term effects of radiation on the populations. The following clinics were held at each island - general medical, well baby, immunization, and family planning. The immunization clinic was limited by the fact that the Trust Territory declined a request to provide a supply of oral polio vaccine. A diabetic clinic could not be held because the Trust Territory failed to respond to a request for hypoglycemic agents.

The physician and the public health team were well received at each island. The people very much supported the broad nature of the work of the trip; namely, general health care for all people on the islands.

Farewell parties were hosted by the people of each island at the conclusion of the visit. At Utirik the biggest party in some years occurred as the entire population gathered at the school to sing, dance, and feast until the

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early hours of the morning. At Rongelap several singing and dancing groups entertained. Bikini feasted the medical team and the ship's crew to a roasted pig.

Political matters as well as medical examinations were discussed on each island. There was general agreement by the people of Utirik, Rongelap, and Bikini as to disfavor and distrust of the present medical program. Each island had individual grievances. These political problems will be dealt with in a separate paper.

There were few problems encountered along the trip. The ship and crew ably assisted in many areas. The lack, however, of a single captain on board seemed to present a problem with responsibility for decisions and control of activities. ERDA might want to discuss further with the Army and Global the need for a single licensed captain for the LCU-26.

Equipment problems on board the ship were limited to the radios. None of the several sets on board functioned completely at any time. This dysfunction poses a potential serious problem in the event of a need for emergency radio communications.

The heavy equipment division of Global at Kwajalein should be cited for poor handling of ERDA equipment. In March 1976 they were careless in the loading of the whole body counting trailer resulting in damage to the trailer. Damage to the frame was sustained on loading and in off loading the door frames were twisted so badly one door cannot be closed completely. This damage to the door has not been repaired even at this time. Water damage to the trailer is now occurring due to leakage around the bad door.

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For this voyage, heavy equipment lifted the whole body counting trailer on to a low boy trailer and brought it to the pier to place it on the LCU despite specific instructions on the work order to load the medical trailer. It seems they are not attentive to details.

Other problems with the trailers include the fact that the new Teflon door hinges on the bunk trailer have begun to split thru and these will need to be replaced. All the new door locks on the bunk and whole body trailers are not usable due to corrosion. Some preventive maintenance might solve this problem.

The bunk trailer had its floor replaced before the trip due to water damage, yet no attempt seemed to have been made to seal the leaks. The ship's crew was required to spend a day sealing the roof of the trailer from rain. The airconditioning vents leak and water streaks on the walls are evidence of other sources.

The medical trailer despite its run down condition still functions well with no new problems.

Another problem occurred at Kwajalein during the trip. ERDA 1, the Boston whaler used to travel to Ebeye was removed from the water for engine overhaul. In the course of picking the boat off its trailer by the Small Boat Marina staff, the boat was dropped resulting in significant damage to the hull. It is understandable that accidents will happen. However, it is only right that any such damage be reported to the ERDA coordinator or physician at Kwajalein, which was not done in this case. The damage was discovered ten days after my return when an inquiry was made as to why the long delay in returning the boat to operation. The problem now is that there is no fiberglass supplies to repair

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the damage.

These problems have all been discussed with the ERDA coordinator at Kwajalein in the hopes of correcting such things in the future.

This report is submitted by:

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